(D.	LOBBYING EXPEN			RT		Albert September 1900
	NUARY 1 - JUNE 30 <u>, 2007 </u>		igust 15 Fue february	15]	POR OFFICE USE ONLY POSTNAR DAR. D/15/60. B - EZ (5/2007)
<u>Mail to:</u> the Board of Ed OR Fax to: (225)763-8787	nics, 2415 Quail Dr., 3rd Floor or (225)763-8780	, Baron I	Rouge, LA 7090)S		3070507
1. Name Hard	dey, Jr.	John	4		е	12
Cest	296	Piret			Mt	# E
2. Business Address;	400 West 15th Street, Suite	1200	Austin	Tχ	78701	
	Street and No.		City	State	Zip	二
Mailing Address_	Same as Above					PA COL
						NA 9: 5
3. Resines Phone_	877-826-9865			•		ર્ટા ≥ૂ
	Area Code and Telepho	ne Numi	et			
(Include expendit	rive lobbying expenditures mad- tures from Schedules A and B) tive lobbying expenditures made				s <u>0</u> ,00	SCANNED
	e) (Include expenditures from Sch			M3 31: 4	K	AUG 2 4 2007
	tive lobbying expenditures made on 5 should equal Line 6)	e charing	calendar year:		s 0.00	Ву:
7. Dié you make au.	expenditure exceeding \$50 on o	же осса	sion for an enec	utive bran	nch official:	AUDITE
	through June 30? rugh December 31?	Yes Yes		No I	NA 🕊	AUG 2 4 2007 By: 4
If the answer to e	lither question in Number 7 abo	rve is YE	S, complete Sch	edule A t	and anach.	
8. Did you make ex	penditures exceeding the sum of	\$250 Ro	r un exeçuatve t	wanch off	ficial:	
From July 1 through	nrough June 30? agh December 31?	Yes Yes		No .	NA M	(
If the answer to e	ither question in Number 8 abo	ve is YK	S, complete Sch	edale A a	nd ettach.	
	ands for any reception, social grated during this reporting period		or other functi	on to whi	ich more than twe	nty-live executive branch
	Yes 🗖		No 💽	1	Missing	numbered pages were d had no information
If the answer to N	famber 9 above is YRS, complet	e Schedi	gle B and attach	- 83	on them	
Form 507, Re-	r. 7/04	F	age 1 of 5			

2)	a. Name in Department and many man Agracy.	7878787
	b. Total of all expenditures made January 1 through June 30:	\$
	c. Total of all expenditures made July 1 through December 31: (Wiern applicable)	<u>s</u>
	d. Total of all expenditures made during the calendar year:	8
3)	a. Name of Department and Todividual Agency:	
	b. Total of all expenditures made January 1 through June 30:	\$
	r. Total of all expendinares made July 1 through December 31: (When applicable)	1
	d. Total of all expenditures made during the calendar year:	S

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; that all reportable expenditures have been included herein; and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.

Signature of Labbyin